## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Andrea C. Hughs-Baird et al.

09/686,308

Filed:

October 11, 2000

Title:

GAMING DEVICE HAVING INTERACTING SYMBOLS

Art Unit:

2876

Examiner: Docket No.: 0112300-144

Daniel St. Cyr

Mail Stop Issue Fee

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

## **CERTIFICATE OF MAILING BY EXPRESS MAIL UNDER 37 CFR 1.10**

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- 2. Part B Fee(s) Transmittal;
- 3. A check in the amount of \$1,360.00;
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Respectfully submitted,

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TRANSMITTAL OF PAYMENT OF ISSUE FEE (Large Entity) (37 C.F.R. 1.311)					Docket No. 0112300-144	
Applicant(s): Andrea C	. Hughs-Baird et al.					
Serial No.	Filing Date	Examiner	Group Ar	t Unit	Confirmation No.	
09/686,308	October 11, 2000	Daniel St. Cyr	2876		5160	
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transmitted to the USPTO, on the date indicated below. P. O. BOX 1135 CHICAGO, IL 60690-1135 (Signatu RADEN (Ozi APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/686,308 10/11/2000 Andrea C. Hughs-Baird 0112300/144 TITLE OF INVENTION: GAMING DEVICE HAVING INTERACTING SYMBOLS SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE APPLN, TYPE DATE DUE nonprovisional NO \$1300 \$1300 11/13/2003 EXAMINER CLASS-SUBCLASS ART UNIT ST CYR, DANIEL 2876 235-375000 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys Bell, Boyd & Lloyd LLC or agents OR, alternatively, (2) the name of a ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. single firm (having as a member a registered O "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Reno, NV Please check the appropriate assignce category or categories (will not be printed on the patent) ☐ individual ☐ corporation or other private group entity ☐ government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. ☐ Publication Fee The Commissioner is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-1818 (enclose an extra copy of this form). Advance Order - # of Copies Commissioner for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. (Authorized Signature) (Date) 1 Am 10/03 Losia 11/14/2003 WASFAW2 00000066 09686308 NOTE; The Issue Fee and Publication Fee (if required) will not be accepted from anyone 01 FC:1501 02 FC:8001 other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

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